

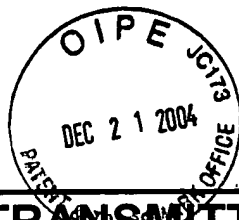
AP/ 3627
JW #

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/705,393
		Filing Date	November 2, 2000
		First Named Inventor	Jeffrey W. Dlott
		Art Unit	3627
		Examiner Name	Fishchetti, Joseph A.
Total Number of Pages in This Submission	6	Attorney Docket Number	5112P004

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 80px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Elena B. Dreszer, Reg. No. 55,128 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	12-17-04

CERTIFICATE OF MAILING/TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Typed or printed name	Carrie Boccaccini
Signature	
Date	12/17/04



FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Complete if Known

Application Number	09/705,393
Filing Date	November 2, 2000
First Named Inventor	Jeffrey W. Dlott
Examiner Name	Fishchetti, Joseph A.
Art Unit	3627
Attorney Docket No.	5112P004

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)
180.00

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

1. EXTRA CLAIM FEES		Extra Claims	Fee from below	Fee Paid
Total Claims	15	36** = 0	50.00	\$0.00
Independent Claims	1	4* = 0	200.00	\$0.00
Multiple Dependent				

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)				(\$) 0.00

**or number previously paid, if greater, For Reissues, see below

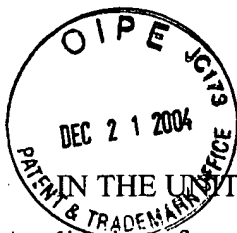
2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403		2403		Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1460		2460		Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify)				Information Disclosure Statement	180.00
SUBTOTAL (2)				(\$)	180.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Elena B. Dreszer	Registration No. (Attorney/Agent)	55,128	Telephone	
Signature		Date	12-17-04		



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re the Application of:

JEFFREY W. DLOTT, ET AL.

Application No.: 09/705,393

Filed: November 2, 2000

For: **Method and System to Communicate
Agricultural Product Information to a
Consumer**

Art Group: 3627

Examiner: Fishchetti, Joseph A.

INFORMATION DISCLOSURE STATEMENT UNDER 37 C.F.R. §1.97

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

In accordance with the duty of disclosure, enclosed is a copy of IDS Citation Form PTO/SB/08 or PTO-1449, together with copies of the documents cited on that form, except for copies not required to be submitted (e.g., copies of U.S. patents and U.S. published patent applications need not be enclosed). This IDS and IDS Citation Form are being submitted before the mailing of a final Office Action. It is respectfully requested that the cited references be considered and that the enclosed copy of PTO/SB/08 be initialed by the Examiner to indicate such consideration and a copy thereof returned to applicant(s).

The submission of this Information Disclosure Statement is not to be construed as a representation that a search has been made in the subject application and is not to be construed as an admission that the information cited in this statement is material to patentability.

The fee set in the amount of \$180.00 for submission of the Information Disclosure Statement is enclosed herewith. Please charge any additional fees due to Deposit Account 02-2666. A duplicate copy of the Fee Transmittal (PTO/SB/17) is enclosed for this purpose.

Respectfully submitted,

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

Date: 12-17-04


Elena B. Dreszer, Reg. No. 55,128

12400 Wilshire Boulevard, 7th Floor
Los Angeles, CA 90025

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Carrie Boccaccini

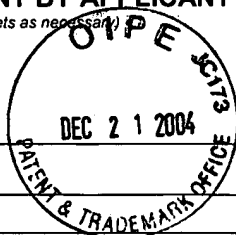
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Date

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Substitute for form 1449A/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)



Sheet 1 of 1

Complete if Known

Application Number	09/705,393
Filing Date	November 2, 2002
First Named Inventor	Diott, Jeffrey
Group Art Unit	3627
Examiner Name	Joseph H. Fishetti

Attorney Docket No: 5112P004

US PATENT DOCUMENTS

Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	US-31023	09/07/1982	Hall III, Arthur D.	
	US-6,114,699	09/05/2000	Barton, Franklin E., et al.	

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ²

OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

EXAMINER**DATE CONSIDERED**

Substitute Disclosure Statement Form (PTO-1449)

* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional) ² Applicant is to place a check mark here if English language Translation is attached